Image# 12972563606 PAGE 1 / 12

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Aut	norizea Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
Citizens 4 Ethics in G	overnment		
<u> </u>			
ADDRESS (number and street)	4117 Hillsboro Pike		
Check if different	Suite 300-315		
than previously reported. (ACC)	Nashville		TN 37215
2. FEC IDENTIFICATION N	UMBER ▼ CIT	<b>Y A</b>	STATE ▲ ZIP CODE ▲
C C00524082		S THIS NEW (N) OI	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:		20 (M3) Jun 20 (M 20 (M4) Jul 20 (M7	(Non-Election Year Only)
April 15 Quarterly Report (	O1)		
July 15 Quarterly Report (	(C) 12-Day	Primary (12P)  Convention (12C)	General (12G) Runoff (12R)  Special (12S)
Cottober 15 Quarterly Report (	·	Convention (120)	opodiai (120)
January 31 Year-End Report (	YE) Election	on on	in the State of
July 31 Mid-Year Report (Non-electi Year Only) (MY)	POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Repor (TER)	t Electio	on on	in the State of
5. Covering Period 0	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	through 09	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined t	his Report and to the best of	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasur	er Michael Leisey		
Signature of Treasurer Mic	hael Leisey	[Electronically Filed]	Date 10 / 15 / 2012
NOTE: Submission of false, error	neous, or incomplete information	n may subject the person signin	g this Report to the penalties of 2 U.S.C. §437g.
Office Use			FEC FORM 3X Rev. 12/2004

### SHMMARY DAGE

	OF RECEIPTS AND DISBURSEMENTS	- 1
FEC Form 3X (Rev. 02/2003)		Page <b>2</b>
Write or Type Committee Name		
Citizens 4 Ethics in Government		
Report Covering the Period: From:	07 14 2012 T	To: 09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2012		0.00
(b) Cash on Hand at  Beginning of Reporting Period	73573.00	
(c) Total Receipts (from Line 19)	95000.00	200100.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	168573.00	200100.00
7. Total Disbursements (from Line 31)	168213.52	199740.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	359.48	359.48
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
Debts and Obligations Owed BY     the Committee (Itemize all on     Schedule C and/or Schedule D)	0.00	
This committee has qualified as a mul	Iticandidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	
	Toll Free 800-424-9530	

Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### Citizens 4 Ethics in Government

tributions (other than loans) From: Individuals/Persons Other Than Political Committees		
Than Political Committees		
	95000.00	200000.00
(i) Itemized (use Schedule A)	33000.00	200000.00
(ii) Unitemized	0.00	100.00
(iii) TOTAL (add		
Lines 11(a)(i) and (ii)▶	95000.00	200100.00
Political Party Committees	0.00	0.00
(such as PACs)	0.00	0.00
Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)▶	95000.00	200100.00
sfers From Affiliated/Other		
y Committees	0.00	0.00
oans Received	0.00	0.00
- Denoumente Dessived	0.00	0.00
· ·	0.00	0.00
· · · · · · · · · · · · · · · · · · ·	0.00	0.00
ical Committees	0.00	0.00
er Federal Receipts		
idends, Interest, etc.)	0.00	0.00
sfers from Non-Federal and Levin Funds	7	
Non-Federal Account		
(from Schedule H3)	0.00	0.00
evin Funds (from Schedule H5)	0.00	0.00
Leviii i unus (iloin ochedule 110)		
Total Transfers (add 18(a) and 18(b))	0.00	0.00
	Political Party Committees	(iii) TOTAL (add Lines 11(a)(i) and (ii)

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures:  (a) Allocated Federal/Non-Federal		Calcildai 16ai-10-Date		
Activity (from Schedule H4)				
(i) Federal Share	0.00	0.00		
(i) N 5 1 10	0.00	0.00		
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00		
Expenditures	2925.00	2925.00		
(c) Total Operating Expenditures	7			
(add 21(a)(i), (a)(ii), and (b)) ▶	2925.00	2925.00		
Transfers to Affiliated/Other Party				
Contributions to	0.00	0.00		
Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures	165288.52	196815.52		
(use Schedule E)  Coordinated Party Expenditures	103200.32	190015.32		
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00		
(doe concade 1)	7			
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To:				
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
F				
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds				
(add Lines 28(a), (b), and (c))▶	0.00	0.00		
_				
Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C. §431(20))				
(a) Allocated Federal Election Activity				
(from Schedule H6)				
(i) Federal Share	0.00	0.00		
	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add	5.00			
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	168213.52	199740.52		
Total Federal Disbursements				
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	168213.52	199740.52		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	95000.00	200100.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	95000.00	200100.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	2925.00	2925.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	2925.00	2925.00

#### SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF 12 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Citizens 4 Ethics in Government Full Name (Last, First, Middle Initial) Daniel G. Anderson Date of Receipt Mailing Address 1 W. Irving St. 2012 07 25 City Zip Code State Transaction ID: SA11AI.4137 MD Chevy Chase 20815 Amount of Each Receipt this Period FEC ID number of contributing C 20000.00 federal political committee. Receipt Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 20000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Andrew W. Miller Jr. Date of Receipt Mailing Address 30 Burton Hills Blvd. Suite 325 07 2012 14 City State Zip Code Transaction ID: SA11AI.4121 TN Nashville 37215 Amount of Each Receipt this Period FEC ID number of contributing C 55000.00 federal political committee. Receipt Name of Employer Occupation Healthmark Ventures CEO Receipt For: Aggregate Year-to-Date ▼ Primary General 160100.00 Other (specify) Full Name (Last, First, Middle Initial) **c.** Andrew W. Miller Jr. Date of Receipt Mailing Address 30 Burton Hills Blvd. M = M 2012 07 17 Suite 325 City Zip Code State Transaction ID: SA11AI.4122 TN Nashville 37215 Amount of Each Receipt this Period FEC ID number of contributing 20000.00 С federal political committee. Receipt Name of Employer Occupation CEO Healthmark Ventures Receipt For: Aggregate Year-to-Date ▼ Primary General 180100.00 Other (specify) 95000.00 SUBTOTAL of Receipts This Page (optional)..... 95000.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 7 OF 12
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only one)		
	Detailed Summary Page	X 21b 27	22 23 28b	24 25 26 28c 29 30l
Association and 17				
Any information copied from such Reports and Stater or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
Citizens 4 Ethics in Government				
Full Name (Last, First, Middle Initial)			Data of Bishamana	
- Troy Brewer CPA Inc.			Date of Disbursem	ent
Mailing Address 6213 Charlotte Ave			08 27	2012
Suite 112 City	State Zip Code			
Nashville	TN 37209		Transaction ID :	SB21B.4157
Purpose of Disbursement Accounting Compliance			Amount of Each Di	sbursement this Period
Candidate Name		Category/		
		Type		2850.00
Office Sought: House Disburser Senate	ment For: 2012			
President	Primary			
State: District:	(-p)/ <b>▼</b>			
Full Name (Last, First, Middle Initial)				
<b>3.</b>			Date of Disbursem	ent
Mailing Address			M = M / D = D	/ Y Y Y Y Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement				
Candidate Name			Amount of Each Di	sbursement this Period
Candidate Name		Category/ Type		
Office Sought: House Disburser	ment For:	.,,,,		,
Senate	Primary General			
President	Other (specify) ▼			
State: District:  Full Name (Last, First, Middle Initial)				
<b>.</b>			Date of Disbursem	ent
Mailing Address			M M / D D	/ Y Y Y Y Y
City	State Zip Code			
	Oldic Zip Godd			
Purpose of Disbursement			Amount of Fook Di	ialaaasaast thia Daviad
Candidate Name		Category/ Type	Amount of Each Di	sbursement this Period
Office Sought: House Disburser	ment For:	.,,,,		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
CUPTOTAL of Disk				2850.00
SUBTOTAL of Disbursements This Page (optional)		·····		2000.00
TOTAL This Period (last page this line number only)	)			2850.00
( page and mile manned only)				

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

	MILLS HOLL LIBERT EXTENSIONES		FOR LINE	24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICA	TION NUMBER ▼
C	itizens 4 Ethics in Government		C C00524082	
			M / D D	/ Y = Y = Y
Ch	eck if 24-hour report 48-hour report New report Amends report			
	Full Name (Last, First, Middle Initial) of Payee Gill Media	Date		
	Gili Media		07	/ Y Y Y Y Y Y 2012
	Mailing Address 1616 Westgate Circle		07 14	2012
	City State Zip Code	Amoun	nt	
	City State Zip Code Brentwood TN 37027		7 7 7	5875.00
	Purpose of Expenditure  Category/	Office Sough	nt: House	State: TN
	Media-Radio Satisfariya Type		Senate	District: 06
	Name of Federal Candidate Supported or Opposed by Expenditure:	Check One:	President Support	Oppose
	DIANE L MRS. BLACK			
	Calendar Year-To-Date Per Election for Office Sought 37402.00	2012	nt For: Primary	General
	loi oliloo oodgiit		her (specify)	
	Full Name (Last, First, Middle Initial) of Payee Pete James	Date		
	Mailing Address 500 Washington St.		07 / 16	2012
	Maining Address 500 wasnington St.	Amoun	nt	
	City State Zip Code			50000.00
	Tullahoma TN 37388		ction ID : SE.4123	Ctoto
	Purpose of Expenditure Media-Cable  Category/ Type	Office Sough	nt: House Senate	State: TN
	Name of Federal Candidate Supported or Opposed by Expenditure:		Presiden	District: 06
	DIANE L MRS. BLACK	Check One:	Support	X Oppose
	Calendar Year-To-Date Per Election	Disbursemen	nt For:   Primary	y General
	for Office Sought	2012 Oth	her (specify)	
_				
	(a) SUBTOTAL of Itemized Independent Expenditures	•	7 7	55875.00
	(b) SUBTOTAL of Unitemized Independent Expenditures	•	- <del></del>	
	(c) TOTAL Independent Expenditures			
			<del></del>	
	Under penalty of perjury I certify that the independent expenditures reported herein were r	not made in c	cooperation, consu	tation, or concert
1	with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.			
	Michael Leisey [Electronically Filed] Data	M = M /		T Y Y
	Signature Date	10	15 20	012

### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

			FOR LINE	24 OF FORM 3X
	ME OF COMMITTEE (In Full)		FEC IDENTIFICAT	ON NUMBER ▼
C	itizens 4 Ethics in Government			• • • • • • • •
			C C00524082	
Ch	eck if 24-hour report 48-hour report New report Amends report		- M / D - D /	Y I Y I Y I Y
_	Full Names (Lock First Middle Initial) of Days			
	Full Name (Last, First, Middle Initial) of Payee Right Way Marketing	Date	M / D D /	Y   Y   Y   Y
	Mailing Address 354 Shadowtown Rd.		07 30	2012
	Suite 205	Amoun	nt	
	City State Zip Code			9598.02
	Blountville TN 37617	Transac	ction ID : SE.4148	
	Purpose of Expenditure  Category/	Office Sough		State: TN
	Robo Calls/Push Type		Senate	District: 06
	Name of Federal Candidate Supported or Opposed by Expenditure:		President	
	DIANE L MRS. BLACK	Check One:	Support	X Oppose
	Calendar Year-To-Date Per Election	Disbursemen	t For:   Primary	General
	for Office Sought	2012	ner (specify)	
	Full Name (Last, First, Middle Initial) of Payee	Date		
	Right Way Marketing	M	M / D D /	Y Y Y Y Y
	Mailing Address and a second second		07 31	2012
	Mailing Address 354 Shadowtown Rd.	Amaun	\.	
	Suite 205	Amoun	11	
	City State Zip Code	11.		650.00
	Blountville TN 37617		ction ID : SE.4152	
	Purpose of Expenditure Robo/Push Poll Category/ Type	Office Sough	t: House Senate	State: TN  District: 06
	Name of Federal Candidate Supported or Opposed by Expenditure:		President	
	DIANE L MRS. BLACK	Check One:	Support	X Oppose
	DIANE L MRS. BLACK			N obbass
	Calendar Year-To-Date Per Election for Office Sought	2012	nt For: Primary her (specify)	General
	(a) SUBTOTAL of Itemized Independent Expenditures	<b>.</b>		10248.02
	(b) SUBTOTAL of Unitemized Independent Expenditures	<b>.</b> .		
	(c) TOTAL Independent Expenditures	<b>•</b>	7	
	Under penalty of perjury I certify that the independent expenditures reported herein were r with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.			
	Michael Leisey [Electronically Filed] Date	10 /	15 / Y Y Y	12
	Signature			

PAGE 9

OF

12

Signature

### SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES    PAGE 10 OF FOR LINE 24 OF FOR	DER ▼    Y
Citizens 4 Ethics in Government  Check if 24-hour report 48-hour report New report Amends report filed on 48-hour repo	00 TN 06 ose
Check if 24-hour report 48-hour report New report Amends report filed on Full Name (Last, First, Middle Initial) of Payee Right Way Marketing  Mailing Address 354 Shadowtown Rd. Suite 205  City State Zip Code 3500.  Blountville TN 37617  Transaction ID: SE.4156  Purpose of Expenditure Poll/Survey  Name of Federal Candidate Supported or Opposed by Expenditure: DIANE L MRS. BLACK  Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee  WKRN TV  Mailing Address 441 Murfreesboro Pike	00 TN 06 ose
Check if 24-hour report 48-hour report New report Amends report filed on Amends report file	00 TN 06 ose
Check if 24-hour report 48-hour report New report Amends report filed on  Full Name (Last, First, Middle Initial) of Payee Right Way Marketing  Mailing Address 354 Shadowtown Rd.  Suite 205  City State Zip Code Blountville TN 37617  Transaction ID: SE.4156  Purpose of Expenditure Poll/Survey  Name of Federal Candidate Supported or Opposed by Expenditure: DIANE L MRS. BLACK  Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee  WKRN TV  Mailing Address 441 Murfreesboro Pike	00 TN 06 ose
Right Way Marketing  Mailing Address 354 Shadowtown Rd. Suite 205  City State Zip Code Blountville TN 37617  Purpose of Expenditure Poll/Survey  Category/ Type  Category/ Type  Category/ Type  Category/ Type  Office Sought:  Name of Federal Candidate Supported or Opposed by Expenditure: DIANE L MRS. BLACK  Calendar Year-To-Date Per Election for Office Sought  Pull Name (Last, First, Middle Initial) of Payee  WKRN TV  Mailing Address 441 Murfreesboro Pike	00 TN 06 ose
Mailing Address 354 Shadowtown Rd. Suite 205  City Blountville TN 37617  Transaction ID: SE.4156  Purpose of Expenditure Poll/Survey  Category/ Type  Category/ Type  Office Sought:  Name of Federal Candidate Supported or Opposed by Expenditure: DIANE L MRS. BLACK  Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee  WKRN TV  Mailing Address 441 Murfreesboro Pike	00 TN 06 ose
Mailing Address 354 Shadowtown Rd.  Suite 205  City State Zip Code Blountville TN 37617  Transaction ID: SE.4156  Purpose of Expenditure Poll/Survey  Name of Federal Candidate Supported or Opposed by Expenditure: DIANE L MRS. BLACK  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee  WKRN TV  Mailing Address 441 Murfreesboro Pike	00 TN 06 ose
Suite 205  City State Zip Code Transaction ID : SE.4156  Purpose of Expenditure Poll/Survey Category/ Type Office Sought: Senate District: President DIANE L MRS. BLACK  Calendar Year-To-Date Per Election for Office Sought 196815.52 Disbursement For: Primary General Name (Last, First, Middle Initial) of Payee WKRN TV  Mailing Address 441 Murfreesboro Pike	TN 06 ose
City Blountville TN 37617  Transaction ID: SE.4156  Purpose of Expenditure Poll/Survey  Category/ Type  Office Sought:  Name of Federal Candidate Supported or Opposed by Expenditure: DIANE L MRS. BLACK  Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee WKRN TV  Mailing Address 441 Murfreesboro Pike	TN 06 ose
Blountville  TN 37617  Transaction ID: SE.4156  Purpose of Expenditure Poll/Survey  Name of Federal Candidate Supported or Opposed by Expenditure: DIANE L MRS. BLACK  Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee  WKRN TV  Mailing Address 441 Murfreesboro Pike	TN 06 ose
Purpose of Expenditure Poll/Survey  Category/ Type  Office Sought: House State: Senate District: President  Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee  WKRN TV  Mailing Address 441 Murfreesboro Pike	06 ose
Poli/Survey  Name of Federal Candidate Supported or Opposed by Expenditure:  DIANE L MRS. BLACK  Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee  WKRN TV  Mailing Address 441 Murfreesboro Pike  District:  President  Check One:  Support  Disbursement For:  Primary  Other (specify)  Date	06 ose
Name of Federal Candidate Supported or Opposed by Expenditure:  DIANE L MRS. BLACK  Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee  WKRN TV  Mailing Address 441 Murfreesboro Pike	ose
DIANE L MRS. BLACK  Check One: Support Opport  Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee  WKRN TV  Mailing Address 441 Murfreesboro Pike	
for Office Sought  Full Name (Last, First, Middle Initial) of Payee  WKRN TV  Mailing Address 441 Murfreesboro Pike	
for Office Sought  Full Name (Last, First, Middle Initial) of Payee  WKRN TV  Mailing Address 441 Murfreesboro Pike	oral
Full Name (Last, First, Middle Initial) of Payee WKRN TV  Mailing Address 441 Murfreesboro Pike	Elai
WKRN TV  Mailing Address 441 Murfreesboro Pike	
Mailing Address 441 Murfreesboro Pike	
Mailing Address 441 Murfreesboro Pike	YYY
Amount	
City State Zip Code 15640.	00
Nashville TN 37210 Transaction ID : SE.4127	
Purpose of Expenditure  Media-Television  Category/  Category/  Office Sought:   House State:	TN
Senate District:	06
Name of Federal Candidate Supported or Opposed by Expenditure:	
DIANE L MRS. BLACK  Check One: Support Opport	ose
Calendar Year-To-Date Per Election Disbursement For: Primary General Control C	eral
for Office Sought 146970.00 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	0
(a) SUBTUTAL OF Iterritized independent Experiorities	,
(b) SUBTOTAL of Unitemized Independent Expenditures	
(b) SOBTOTAL OF Officernized independent Experiorities	
(c) TOTAL Independent Expenditures	
(c) TOTAL Independent Experiorations	-
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or co	
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a po	

Signature

### SCHEDULE E (FEC Form 3X)

TFN	MIZED INDEPENDENT EXPENDITURES		PAGE	E 11	OF 12
	MED MOET ENDERT EXTENDITIONED				4 OF FORM 3X
	IE OF COMMITTEE (In Full)		FEC IDENTI	FICATIO	N NUMBER ▼
Cit	izens 4 Ethics in Government		C C0052	24082	
Chec	ck if 24-hour report 48-hour report New report Amends report		M / D	D /	Yayayay
	Full Name (Last, First, Middle Initial) of Payee WSMV TV	Date			
N	Mailing Address 5700 Knob Rd.		07	18	2012
L		Amoun	nt		
- 1	City State Zip Code Nashville TN 37209		-		43928.00
$\perp$	Divinosa of Evnanditure	Transac Office Sough	tion ID : SE.		State: TN
	Purpose of Expenditure Media-TV  Category/ Type	Office Sough	Sen		District: 06
- 1	Name of Federal Candidate Supported or Opposed by Expenditure:  DIANE L MRS. BLACK	Check One:		port	Oppose
	Calendar Year-To-Date Per Election for Office Sought	Disbursement 2012 Oth	t For: Pi		General
	Full Name (Last, First, Middle Initial) of Payee WTVF TV			D /	2012
N	Mailing Address 474 James Robertson Parkway	Amoun		24	2012
	City State Zip Code				24012.50
١	Nashville TN 37219	Transac	ction ID : SE	4139	24012.50
F	Purpose of Expenditure Media-Television  Category/ Type	Office Sough		ıse	State: TN District: 06
- 1	Name of Federal Candidate Supported or Opposed by Expenditure:  DIANE L MRS. BLACK	Check One:		sident port	Oppose
	Calendar Year-To-Date Per Election for Office Sought	Disbursemen 2012 Oth	nt For: Pont	rimary	General
(a	a) SUBTOTAL of Itemized Independent Expenditures	<b>.</b>	-	- <del>-</del>	67940.50
(b	substotal of Unitemized Independent Expenditures	· [	7		
(с	e) TOTAL Independent Expenditures	· [	7	<i>T</i>	
wi	nder penalty of perjury I certify that the independent expenditures reported herein were rith, or at the request or suggestion of, any candidate or authorized committee or agent of arty committee) any political party committee or its agent.				
	Michael Leisey [Electronically Filed] Data	M M /	D D /	Y   Y   2013	

### S

Michael Leisey

Signature

SCHEDULE E (FEC Form 3X)	
TEMIZED INDEPENDENT EXPENDITURES	PAGE 12 OF 12 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Citizens 4 Ethics in Government	C C00524082
Check if 24-hour report 48-hour report New report Amends report	ort filed on
Full Name (Last, First, Middle Initial) of Payee Yake Films LLC	Date
Mailing Address 204 Lighthouse Terrace	07 / 25 / Y 2012
City State Zip Code Franklin TN 37064	6500.00
Franklin TN 37064	Transaction ID : SE.4143
Purpose of Expenditure Media-TV Category/ Type	Office Sought: House State: TN Senate District: 06 President
Name of Federal Candidate Supported or Opposed by Expenditure:	
DIANE L MRS. BLACK	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee Yake Films LLC	Date 07 31 2012
Mailing Address 204 Lighthouse Terrace	Amount
City State Zip Code	
Franklin TN 37064	5585.00
Purpose of Expenditure Category/	Transaction ID : SE.4151   Office Sought:
Media-TV Production  Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District: 06 President
DIANE L MRS. BLACK	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	▶ 12085.00
(b) SUBTOTAL of Unitemized Independent Expenditures	· · · · · · · · · · · · · · · · · · ·
(c) TOTAL Independent Expenditures	··· <b>▶</b> 165288.52
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	

[Electronically Filed]

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Date

15

2012